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**MINUTES OF THE MEETING OF THE BOARD OF DIRECTORS OF SOUTH STAFFORDSHIRE AND SHROPSHIRE HEALTHCARE NHS FOUNDATION TRUST HELD IN THE REDWOODS CENTRE, SHREWSBURY AT 1330 HRS ON THURSDAY 28<sup>TH</sup> MARCH 2013**

**1 Present**

Stephen Jones	Chair
Roger Craven	Non Executive Director
Jayne Deaville	Director of Finance and Performance
Neil Carr	Chief Executive
Neil Brimblecombe	Director of Quality and Professional Practice
Dr Claire Barkley	Medical Director
Steve Grange	Director of Business Development
Therèsa Moyes	Director of Quality and Clinical Performance
Dr Liz Nicholson	Non Executive Director
Dr Ian Wilson	Non Executive Director

**2 In Attendance**

Jane Landick, Company Secretary  
Pat Wain, Deputy Director of Nursing (agenda items 8.3 and 9.5)  
Martin Evans, Head of Communications (agenda item 9.2)  
Steve Riddle, Governor Member  
Robin Harvey, Governor Member  
Jackie Boyle, Governor Member  
Ravi Bhakri, Governor Member  
Michael Allen, Governor Member  
Lisa Agell, Head of Mental Health Nursing (agenda item 9.4)  
Chris Malvern, Workforce Planning and Development Manager (agenda item 9.3)

**ITEM 1 WELCOME AND INTRODUCTIONS**

- 3** Steve Jones welcomed all present to the meeting.

**ITEM 2 APOLOGIES FOR ABSENCE**

- 4** Sue Nixon, Non Executive Director  
Ron Hilton, Non Executive Director  
Paul Bunting, Non Executive Director

**ITEM 3 MINUTES OF THE MEETING HELD ON THURSDAY 28<sup>TH</sup> FEBRUARY 2013**

- 5** The minutes of the Board of Directors meeting held on Thursday 28<sup>th</sup> February 2013 were agreed and signed by the Chair as a true and accurate record.

**ITEM 4 MATTERS ARISING FROM THE 28<sup>TH</sup> FEBRUARY 2013 MINUTES**

- 6** 6.1 The actions relating to the implications and risks relating to the NHS Provider Licence and the review of Board reporting were noted to be in progress.

## ITEM 5 CHIEF EXECUTIVE'S REPORT AND ENVIRONMENTAL SCAN

- 6 Neil Carr reported on the following events/activities and issues:
- 6.1 Recognising the challenges of the Francis recommendations, the critical importance of maintaining **quality and the Cost Improvement Programme** affecting the Trust and the local health economy, it was noted that all contracts with the Trust's main commissioners had now been signed.
  - 6.2 Three key questions for the Trust were highlighted arising from the **Francis Report**: do we have a culture which allows issues to go unnoticed or unreported; are there any latent conditions which could allow issues to arise; and are our values, attitudes and behaviours conducive to caring – do we 'uncrush' the nurses?
  - 6.3 The impacts of the recommendations of the contingency planning team with respect to the **future of Mid Staffordshire Hospitals NHS FT** were noted.
  - 6.4 Discussions with commissioners with respect to a radical change in the way **dementia services** were provided and commissioned were noted as progressing well.
  - 6.5 A new **Estates Strategy** involving significant rationalisation of the community estate was in the process of being developed and it was agreed that this would be presented to the Governors for discussion at an Engagement Group and/or the Council of Governors meeting as appropriate and before presentation to the Board.
- 7 The following Board Committee reports were received and noted:
- 7.1 **Foundation Management Team** [11<sup>th</sup> March 2013] – Therèsa Moyes highlighted the debate on assistive technologies and subsequent agreement with commissioners on early CQUINs in this area.
  - 7.2 **Quality, Effectiveness and Risk** [14<sup>th</sup> March ] – Therèsa Moyes reported on in depth discussion around the lessons learned from a complex complaint and a review of the Francis recommendations from which the Board paper on this subject had resulted.
  - 7.3 **Business Development and Investment** [15<sup>th</sup> February 2013] – Steve Grange gave a verbal update on the subsequent meeting held on 15<sup>th</sup> March 2013 at which a new approach for future meetings had been agreed, to include both the transactional issues to be addressed as an investment committee, but also following a recommendation by Paul Bunting, to include the opportunity for some free thinking around a marketing and sales strategy and to invite individuals to the meeting to explore and stimulate innovation and ideas.
  - 7.4 **Service User and Carer** [4<sup>th</sup> March 2013]
- 8 The following documents were ratified by the Board:
- 8.1 Policy for the management of service users who do not attend appointments and are at risk of being lost to the service
  - 8.2 Disposal and Condemnation of Assets Policy

Neil Carr commended the supportive and pro-active approach being taken with the policy for the management of service users who do not attend appointments.

## ITEM 8.3 SINGLE SEX ACCOMMODATION: COMPLIANCE DECLARATION

- 9 Pat Wain presented the paper summarising the work undertaken since the previous

declaration to improve and maintain the privacy and dignity of service users. Neil Carr commented that he felt the report somewhat understated the excellent work which had been completed during the year, not only to assure privacy and dignity, but also to ensure that patients felt safe and protected and commended the work undertaken to achieve this and that this should be recognised and celebrated. The compliance statement was formally approved for uploading onto the Trust website in accordance with the requirements of the NHS Constitution.

<b>Action:</b> Uploading of declaration to Trust website (PW)
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## ITEM 9.5 PHYSICAL CARE THEMATIC REVIEW 2012

- 10 Pat Wain presented the report as the first such review, which addressed the national requirements and local issues relating to the management of the physical healthcare needs of service users. The information presented covered the period October 2011 to October 2012 and highlighted the progress made to improve care as well as staff understanding of the underpinning factors that contribute to the poor health of people with serious mental illness and others in the Trust's care.

In response to a question from Roger Craven about improved liaison with GPs and the lessons learned from serious incidents involving unexpected deaths in the community, Pat Wain highlighted the involvement of PALS and Service Relations, the focus of the physical care seminar programme and other training and the role of the Quality, Effectiveness and Risk Committee. It was also noted that Neil Brimblecombe had requested a review of deaths relating to substance misuse which would consider the impacts of physical health issues. Claire Barkley commented on the accessibility of blood test results given that at present they were not available electronically across the patch. Jayne Deaville acknowledged that this needed to be addressed and would be taken forward but that there were issues with third party systems and impending changes in the arrangements within the West Midlands. Ian Wilson commented that GPs had been involved in discussions around the physical care pathway and agreed to provide Pat Wain with details of the Quality Outcomes Framework for GPs which addressed physical healthcare issues. Claire Barkley referred to the estates rationalisation work and the need to ensure the impacts on the physical and mental healthcare needs of patients were considered and Steve Grange confirmed that this would be fully evaluated. Neil Carr commended the successes achieved to date with respect to smoking cessation. He also commented on the difficulties often experienced by patients with learning difficulties in addressing their physical healthcare needs in areas such as diabetic support and dentistry. Pat Wain commented that the action plan was an iterative document and would be amended and added to in order to address identified areas of unmet need over time. The action plan for 2013 was formally approved.

## ITEM 6 TRUST ASSURANCE REPORT

- 11 The report was received and noted. Exceptions reports and comments from Board members were recorded as follows:
- 11.1 **Monthly RAYG Status of Essential Standards:** Therèsa Moyes advised that there had been little change since the last report. Claire Barkley reported on an episode of norovirus and one or rotovirus, both of which has been contained and managed. Overall the Trust's incidence of outbreaks was well within seasonal and regional norms.

- 11.2 **Serious Incidents:** Therèsa Moyes advised that all overdue incidents in Shropshire had been completed by the 31<sup>st</sup> March 2013 deadline.
- 11.3 **Francis Report – Update on Trust actions to date:** Therèsa Moyes advised that it was anticipated that under the duty of candour, there would be likely to be more and broader investigations requiring to be undertaken with consequent resource and capacity issues. It was noted that clinical teams have all been asked to reflect on the contents of the Francis Report following the staff briefings and video from Neil Carr which were made available to all staff across the Trust and that feedback from this was being co-ordinated by the Communications Team and fed back to Therèsa Moyes for review and discussion at the Quality, Effectiveness and Risk Committee.
- 11.4 **Finance:** Jayne Deaville reported that at month ten the year-to-date position showed an 'actual' deficit of £6.0m, representing a budgetary underspend of £1.5m against the year-to-date plan and included the 'one-off' fixed asset impairment of £13.7m in relation to the valuation of the new Redwoods Centre.
- 11.5 **Contract Activity and Projects:** Jayne Deaville advised that all targets continued to be met.
- 11.6 **Information Governance:** it was noted that there had been no information governance incidents or Freedom of Information Act requests which had exceeded the statutory deadline.
- 11.7 **Commercial Activity/Business Development:** Steve Grange highlighted the National Veterans Mental Health Network conference on 30<sup>th</sup> April 2013, the impending implementation of the pilot service for personality disorders in the Probation Service and the Ministry of Defence 'app' which was due to go live on Apple and Android devices.
- 11.8 **Sickness Absence:** Neil Brimblecombe highlighted the sickness absence which continued to reduce towards 5% and explained that the increase in short term sickness reflected the adjustment of the tolerance limits which would trigger interventions. In response to a question from Ian Wilson about the approach to the management of stress amongst employees, Neil Brimblecombe outlined the initiatives in place but agreed to discuss the wider implications and issues with Ian Wilson outside of the meeting. The commencement of the contract for the provision of Occupational Health services to the Trust was noted and it was agreed that a presentation to the Board at some stage by Team Prevent would be welcomed. In the meantime, the Human Resources and Organisational Development Committee would be monitoring the contract and service provision.
- 11.9 **Infection Control:** Claire Barkley advised that 88% of staff in Staffordshire were compliant with infection control mandatory training compared with 82% in Shropshire. The current hotspot area was Inclusions at 57% where action was been taken to implement alternatives to face to face training including the use of workbooks and online training. She confirmed that hotspot areas would be included in the next report. The nomination of Professor Elliott and his team for both the Royal College of Psychiatrists Older Adults Team of the Year and the National Patient Safety Awards for their falls prevention work was noted and commended.

<b>Action:</b>	Infection control mandatory training hotspot areas to feature in future reports (CB)
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**ITEM 7.1 MODERNISATION OF MENTAL HEALTH SERVICES IN SHROPSHIRE/TELFORD & WREKIN**

- 12 Jayne Deaville reported on the defects resolution which was progressing to plan and provided an update on the service transition and the decommissioning and disposal of Shelton Hospital. She advised that the Supervisory Committee had recommended the bringing forward of certain stage two activities to enable completion within the next four weeks and to this end the Board agreed the appointment of Invigour to support stage two of the process for the disposal of Shelton Hospital.

**ITEM 7.2 CLINICAL SYSTEM REPLACEMENT PROJECT**

- 13 Jayne Deaville advised that the project remained on track with good clinical engagement. Alison Bussey confirmed in response to paragraph 4 of the report, that CAMHS were fully committed to engaging with the project although they had been unable to attend the half day sessions, but that measures were now being taken to ensure this was addressed. Roger Craven noted that the Audit Committee had received an Internal Audit report on the project which indicated a green level of assurance.

**ITEM 7.3 SHROPSHIRE/TELFORD & WREKIN HEALTH AND SOCIAL CARE PARTNERSHIP COMPACT**

- 14 Neil Carr advised that the compact has been established by health and social care partners and signatories to signal their commitment to partnership working to deliver improved health and wellbeing for the people they serve and set out a high level vision and strategy for the health and social care system and commits the signatories to a set of principles and ways of working which will provide a framework for collaborative working through which key elements of the strategy will be delivered and also includes a programme of joint work through which the priority areas for action will be taken forward. In response to a question from Liz Nicholson, Neil Brimblecombe advised that he believed the all services including children's services would be encompassed within the terms of the Compact but that he would check this out and report under matters arising at the next meeting. The Board formally agreed to sign up to the Compact, which it was agreed was to be welcomed.

<b>Action:</b>	Clarification of the inclusion of children's services in the Compact (NB)
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**ITEM 8.1 DRAFT RISK ASSESSMENT FRAMEWORK: TRUST RESPONSE TO MONITOR CONSULTATION**

- 15 Jayne Deaville presented the draft response, which she advised had been considered and approved by the Finance and Performance Committee and the Audit Committee and had been completed with input from Therèsa Moyes from a quality perspective and herself, from a finance perspective. She advised that the general approach to the questions was to recommend a light touch approach to intervention and that the difficulties in applying the 'friends and family test' in a mental health setting had been

highlighted. The consultation response was formally agreed for submission to Monitor by the 4<sup>th</sup> April 2013 deadline.

<b>Action:</b> Submission of consultation response (JD)
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## **ITEM 8.2 TRUST CONSTITUTION**

- 16 Steve Grange advised that he, Jayne Deaville and Jenny Smit had met with representatives from Capsticks Solicitors to work through the constitutional amendments required to ensure compliance with the Health and Social Care Act 2012 and in particular the provisions that were due to come into force from 1<sup>st</sup> April 2013. The Board noted the further amendments proposed in a revised draft of the Constitution circulated on 27<sup>th</sup> March 2013, along with a summary from Capsticks of the further amendments proposed. In response to a question from Ian Wilson relating the allocation of partner governor seats to Clinical Commissioning Groups, Neil Carr advised that agreement had been reached with Shropshire CCG and Telford & Wrekin CCG that the former would have a seat but would also represent the latter. In Staffordshire, it had been agreed that the seat would go to the CCG which had the mental health lead, but that this had not yet been resolved. It was agreed that the constitution would be further amended accordingly, once this was confirmed. A further amendment was noted and agreed to include reference under paragraph 22 to private as well as public sector business. In response to a question from Roger Craven, Jane Landick advised that the Constitution, with the Board's recommended amendments, would be circulated to Governors two weeks in advance of the Council of Governors meeting and would also be shared with governors at the forthcoming Performance and Assurance Group meeting. She advised that the intention was to invite comments and questions which would then be picked up at the Governor training and development session on the subject of the Constitution and Governance which was taking place immediately prior to the Council of Governors meeting led by Capsticks, to enable a detailed discussion prior to the Constitution being presented for approval at the subsequent Council of Governors meeting.

<b>Action:</b> Consultation with governors prior to Council of Governors meeting on 17 <sup>th</sup> April 2013 (JL)
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## **ITEM 9.3 TRUST WORKFORCE PLANNING AND DEVELOPMENT APPROACH**

- 17 Chris Malvern presented the options appraisal paper which it was noted had been the subject of detailed discussion at the Human Resources and Organisational Development Committee. A number of minor amendments to the report arising from the Human Resources and Organisational Development Committee held on 27<sup>th</sup> March 2013 were table and noted. He advised that the report provided Trust Board members with a clear description of developments in the Trust approach to Workforce Planning and Development in light of leaders and managers within the Trust reporting dissatisfaction with the Trust's historical approach to Workforce Planning and Development. In response to this and changes to the external Workforce Planning and Development infrastructure, the options appraisal was undertaken by the Workforce Planning and Development Group which recommended deployment associated with Option D. Neil Brimblecombe emphasised that whilst workforce planning and the paper being presented focussed on process, it was important that it was underpinned by the key principle of having the right skills being utilised in the most cost effective way. In response to a question from Roger Craven, Chris Malvern advised that the approach being taken was to ensure a clear values based focus on

the key principles and to ensure clarity of definitions and approach with the emphasis on meeting the needs of service users and carers. Closer working and understanding between workforce planners and Divisions/Directorates was agreed to as key to the success of this approach. Jayne Deaville commented that equally important was the need to join up workforce planning with business planning, quality improvements, cost improvements and efficiency. The Board formally approved the report and the recommendations of the Human Resources and Organisational Development Committee with respect to the approach to be taken for Workforce Planning and Development within the Trust.

#### **ITEM 9.4 PROJECT TO SHIFT ACUTE MENTAL HEALTHCARE PROVISION FROM HOSPITAL TO COMMUNITY IN SOUTH STAFFORDSHIRE**

- 18 Lisa Agell presented the paper which contained an evaluation of the impact of the closure of the Margaret Stanhope Centre in relation to the quality standards monitored through the previous bed reduction programme to provide assurance to the Board that the bed closures have not negatively impacted on the experience of services users and carers or on the delivery of high quality care. She advised that the data used was compared in the paper to the equivalent period for the previous year. In response to a question from Roger Craven about the added impact of functionalisation, Lisa Agell advised that this would be evaluated in the subsequent evaluation report. The feedback from service users and carers and the lack of negative feedback from GPs was noted. Lesley Crawford advised that she had also met with the local MP, who confirmed that he had had no issues raised by his constituents as a result of the closure. Claire Barkley expressed concern regarding the experience of the 17 year old carer. Lesley Crawford committed to doing more work with young carers within the Division and to ensure that all carers' needs were reviewed as part of the assessment process. Neil Brimblecombe advised that the report had been produced for the CCG cluster and would be shared with them. It was agreed that it should also be shared with the Health Scrutiny Committee. In response to a question from Ian Wilson, Neil Brimblecombe acknowledged the benefits of having a model for evaluating services through standardised measures developed between providers, commissioners and GPs. He advised that some of this was built into contract data sets and was discussed at clinical quality meetings with commissioners, but that GPs were not closely engaged with this process. The Board agreed to continue to support the ongoing evaluation of service provision and referred future scrutiny of reports to the Quality, Effectiveness and Risk Committee.

<b>Action:</b>	Monitoring and review of future reports (QERC) Young carers (LC) Communication with Health Scrutiny Committee (NB)
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#### **ITEM 9.2 COMMUNICATION AND ENGAGEMENT STRATEGY UPDATE**

- 19 Martin Evans presented the report which he advised included both staff and wider engagement work over the past 12 months. He advised that the update report had already been presented to governor members. The changes, developments and successes since last year were summarised, noted and commended. Steve Grange advised that the focus during 2013/14 would be on the development of a sales and marketing strategy reflecting discussions at the last Business Development and Investment Committee meeting. A priority task was also the website redesign, taking into account the views and wishes of key stakeholders including service users and carers. The report was received and noted.

## **ITEM 9.1 FRANCIS REPORT EVALUATION OF TRUST AGAINST KEY FINDINGS**

- 20** Therèsa Moyes gave a detailed overview of the initial analysis of the Trust's position against the Francis report recommendations and advised that there were a number of comprehensive work streams already underway that reflect and provide assurance against some of the recommendations. She advised that at its meeting on 14<sup>th</sup> March 2013, the Quality Effectiveness and Risk Committee agreed eight key work streams to be presented to the Trust Board for approval as the main areas for further development as follows: values based recruiting; use of information/ improving learning from complaints and serious incidents; medical training and education/medical students; duty of candour; clinical engagement; provision of service line management information about clinical practice; nursing practice and a culture of compassion/ emotional support for staff. She advised that the recommendations would also be discussed with governors at the Performance and Assurance Engagement Group on 4<sup>th</sup> April 2013 and that a briefing on the Francis Report would be included in the Council of Governors meeting on 17<sup>th</sup> April 2013. Neil Carr referred to the Leadership Café event during March 2013 at which Professor Glasby had highlighted three key questions around the issues which led to the events at Stafford Hospital (see paragraph 5.2). He advised that it was his intention to ask these questions of the Board at the forthcoming Board Development workshop in June 2013. Therèsa Moyes also summarised the key themes from the Department of Health's response to the Francis recommendations. In response to a question from Roger Craven about the provision of service line information about clinical practice, Therèsa Moyes confirmed that the implementation of the new clinical information system would significantly support this work, along with the complaints and patient experience data being collected. Claire Barkley advised that progress had already been made to review medical training and education needs of medical students. It was noted that the Duty of Candour would need to be included in contracts and that the wider issues and implications of this duty would be the subject of discussion at the Quality, Effectiveness and Risk Committee meeting in May 2013. Neil Carr highlighted examples of where managerial decisions had been interpreted as having broken professional codes of practice and conduct and that this would be an issue for clinicians working in management roles. Therèsa Moyes confirmed that the Department of Health had set a year end deadline for action by Trusts to react and respond in terms of action taken and that a report would be submitted to the Board in advance of this.

The Board noted the approach taken and endorsed the main areas of work identified and subsequently agreed by the Quality, Effectiveness and Risk Committee. The Board also supported the principle that a reference to Francis would be embedded within Trust work programmes rather than as a standalone action plan and agreed that once fully developed, the Francis assurance plan would be referenced in the Trust assurance plan and monitored by the Quality, Effectiveness and Risk Committee.

## **ITEM 10 ANY OTHER NOTIFIED BUSINESS**

- 21** There was no other business.

## **ITEM 11 SUMMARY OF DECISIONS MADE AND AGENDA ITEMS FOR THE NEXT MEETING**



- 22** Decisions made were summarised by the Company Secretary as follows:
- The revised Estates Strategy and specifically the rationalisation of the community estate along with the driving and guiding principles were agreed to be shared with the governors at an Engagement Group or Council of Governors meeting as appropriate.
  - The Francis Report and the Trust response was referred to the Council of Governors for discussion.
  - The policy for the management of service users who do not attend appointments and are at risk of being lost to the service and the disposal and condemnation of assets policy were ratified.
  - The Board approved the declaration of compliance relating to the elimination of mixed sex accommodation, for uploading to the Trust website.
  - The physical care action plan for 2013 was approved.
  - The appointment of Invigour to support stage 2 of the Shelton disposal process was agreed.
  - It was agreed that the Trust would sign up to the Shropshire/Telford & Wrekin Health and Social Care Partnership Compact
  - The consultation response to the Monitor Risk Assessment Framework was agreed for submission to Monitor.
  - The constitutional amendments were agreed for submission for approval to the Council of Governors.
  - The approach to be taken for Workforce Planning and Development within the Trust was agreed.
  - The Board agreed to support the ongoing evaluation of the service provision in Burton on Trent following the closure of the Margaret Stanhope Centre and referred the responsibility for monitoring to the Quality, Effectiveness and Risk Committee.
  - All the recommendations with respect to Trust action regarding the Francis Report were agreed.
- 23** The following future agenda items were agreed:
- Presentation to the Board on the delivery of an Occupational Health service to the Trust and the impacts and benefits by Team Prevent (to be confirmed)
  - Francis Report Update Report (to be confirmed)

## **ITEM 12 DATE AND TIME OF NEXT MEETING**

- 24** The next full Board meeting will take place on Thursday 25<sup>th</sup> April 2013 at 1300 for 1330 in the Board Room, Trust Headquarters, Stafford.

It was noted that in order to meet the deadline for submission of the Annual Plan to Monitor, the May Board would need to take place on **Wednesday 29<sup>th</sup> May 2013** and that to allow time for any amendments to be made, the Annual Plan would be taken as the first item on the agenda. A meeting request would be sent to all Board members to confirm this change.